



Contact person: Marie Merle des Isles
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Please return this form duly completed latest by st August 2017

FAMILY NAME.....CHRISTIAN NAME.....

COMPANY:.....

ADDRESS
 (**private**.....

ZIP CODE / CITY:..... COUNTRY:.....

TEL:.....FAX:.....

EMAIL:PASSPORT NUMBER:.....

DATE AND PLACE OF BIRTH:.....NATIONALITY:.....

Above information given by you will ensure a quick and efficient check-in

Single Guestroom (partially renovated) All Rooms are Non Smoking Inclusive buffet breakfast, Internet, tax and service charges (free parking upon availability)	EUR 175,00 (per night)
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This reservation is subject of availability within group room block. Referring to above event, I would like to make following reservation at the DoubleTree by Hilton Luxembourg

→ **ARRIVAL ON:** → **DEPARTURE ON:**
 (Please note that official check-in time is as of 2:00 p.m.) (Official checkout time is before noon).

I guarantee my reservation with the following credit card details (OBLIGATORY):

Credit card: VISA AMEX MC/EUROCARD DINERS
 OTHER.....

Credit card number:

Expiry date:

Card Owner:

Please note that **any cancellation** occurring **after sending this booking form** will be charged for the value of 1 night. For any cancellation occurring **7 days prior arrival**, the value of the entire stay booked will be charged. Please note that in case of "No Show" the entire stay booked will be charged and the reservation will not be reactivated.

FOR HOTEL USE ONLY - Confirmation

Date:

Confirmation n°:.....

Stamp/Signature:.....

